MUCH IN LITTLE*

Headache, choked discs, and vomiting mean brain tumor.

Exophthalmos, tachycardia, and tremor mean exophthalmic hyperthyroidism.

Hemoptysis means tuberculosis until proven otherwise. Heart failure a frequent cause.

Hematuria means malignancy until proven otherwise. Calculus a frequent cause.

"T. T. M. M. and I" (typhoid, tuberculosis, measles, malaria, and influenza) give no leukocytosis.

Suspect gall-stones in the "4 F" females (fair, fat, forty, and gaseous).

The "old man's disease" (prostatism) must be suspected in the fifties. Examine for urinary retention.

Hemorrhoidectomy is a malignant practice when hepatic cirrhosis with portal back-up is present.

Make thorough examinations of all patients, because:

To have a consultation show one A blue line on the gum, Or a fragile mass in the rectum, Makes the family doctor glum.

TWENTY-FIVE YEARS AGO†

EXCERPTS FROM OUR STATE MEDICAL JOURNAL

Vol. IV, No. 4, April 1906

From some editorial notes:

The Big Thieves.—That the mind of the phyicians is without commercial bent, is so well known as scarcely to require restatement; for, in the words of the "sure thing" operator, doctors and preachers are "good things." As a result of this unfortunate lack of business ability, physicians always have been and doubtless always will be imposed upon by those gentry for whom "commercialism" is the first and the last word, and who know not the meaning of "professionalism. . . . "

Let Us Help.—Other things being equal, it is no less than right that we should lend the weight of our influence and give our patronage to those manufacturers who indicate a desire and an intention to help us in the present fight against fraud, secrecy, and graft in the nostrum business. . . .

The Next Legislature.—There are some bills which we may safely assume will be introduced into the

* Members of the California, Nevada, and Utah Medical Associations are invited to contribute to this column of aphorisms, which will appear from time to time in California and Western Medicine, as sufficient copy accumulates. The aphorisms in this issue were sent in by John William Shuman, M. D., Los Angeles.

next legislature, and we might as well think them over and begin to prepare for them. . . .

From a Notice of the 1906 Annual Session:

The next annual meeting of the state society will be held in San Francisco, the entire week, beginning Tuesday morning, April 17, 1906. . . .

... The committee would further announce that the following time limit has been placed on all contributions: orations, thirty minutes; scientific papers, fifteen minutes; discussions, five minutes. A bell will be rung in each case, one minute before the time expires.

... Members finding subjects of interest in the papers enumerated below will please send their names and choice of subjects to the chairman of the committee, that they may be called upon to enter into the discussions...

From an article on "The Motor Complications of Herpes Zoster" by Albion Walter Hewlett, M.D., San Francisco:

The eruption of herpes zoster, which consists of vesicles upon inflamed bases, is characterized mainly by its limitation to the portion of skin that is supplied by the affected spinal ganglia. Head distinguishes two forms of zoster. The first is merely a symptom of some more general nervous disease and it is called, therefore, symptomatic zoster. The second is a disease sui generis and has been termed acute specific zoster. . . .

From an article on "The Demonstration of Dilatations of the Descending Thoracic Aorta" by Charles Miner Cooper, M. D.:

The descending thoracic aorta is the direct continuation of the aortic arch, and it traverses the posterior mediastinum. It begins at the lower border of the fourth dorsal vertebra and ends by becoming the abdominal aorta at the level of the twelfth dorsal vertebra. At its commencement it lies to the left of the middle line, but as it proceeds downward it inclines inward, approaching a mesial position at its termination. . . .

From an article on "Pityriasis Rosea" by Douglass W. Montgomery, M. D., San Francisco:

In pityriasis rosea, as usually met with, the patient applies for advice on account of a rosy, blotchy rash, well distributed over the body. The rash consists of slightly elevated, light red blotches, usually about the size of those seen in measles or in the roseola of syphilis. . . .

From an article on "The Pathology and Treatment of Tetanus" by T. C. McCleave, M. D., Berkeley, Cal.:

A year ago, in discussing a paper on tetanus before this Association, I called attention to certain newly discovered facts regarding the manner in which the tetanus toxin reaches the spinal cord, and I stated at that time that these discoveries would no doubt lead to improvements in the methods of treatment of this dreadful affection. . .

From an article on "The Requisite Laboratory Equipment for the General Practitioner" by Ray L. Wilbur, M.D., Stanford University:

In these days of the multiplicity of clinical instruments and clinical tests, it becomes of some importance to the general physician to know how much actual equipment is necessary for laboratory work and how far his time and experience will let him go before he needs to call for the services of a laboratory expert. In the present-day medical education

[†] This column strives to mirror the work and aims of colleagues who bore the brunt of state society work some twenty-five years ago. It is hoped that such presentation will be of interest to both old and recent members.